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PTO/SB/05 (12/97)

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UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))	Attorney Docket No.	02939-P0001A	Total Pages	28
	First Named Inventor or Application Identifier			
	Matthew H. Parker, et al.			
	Express Mail Label No.	EM549544505US		

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
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1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original, and a duplicate for fee processing)	6. <input type="checkbox"/> Microfiche Computer Program (Appendix)
2. <input checked="" type="checkbox"/> Specification [Total Pages 22] (preferred arrangement set forth below) <ul style="list-style-type: none">- Descriptive title of the Invention- Cross References to Related Applications- Statement Regarding Fed sponsored R & D- Reference to Microfiche Appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claims(s)- Abstract of the Disclosure	7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) <ul style="list-style-type: none">a. <input type="checkbox"/> Computer Readable Copyb. <input type="checkbox"/> Paper Copy (identical to computer copy)c. <input type="checkbox"/> Statement verifying identity of above copies
3. <input checked="" type="checkbox"/> Drawings(s) (35 USC 113) [Total Sheets 4]	ACCOMPANYING APPLICATION PARTS 8. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) 9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (where there is an assignee) 10. <input type="checkbox"/> English Translation Document (if applicable) 11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 12. <input type="checkbox"/> Preliminary Amendment 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 14. <input checked="" type="checkbox"/> Small Entity <input type="checkbox"/> Statement Statement(s) Status still proper and desired 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input type="checkbox"/> Other:.....
4. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages 2] <ul style="list-style-type: none">a. <input checked="" type="checkbox"/> New executed (original or copy)b. <input type="checkbox"/> Copy from prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed) [Note Box 5 below]i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting Inventor(s) named in the prior application, see 37 CFR a.63(d)(2) and 1.33(b).	
5. <input type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompa- nying application and is hereby incorporated by reference therein	

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information			
<input type="checkbox"/> Continuation	<input type="checkbox"/> Divisional	<input type="checkbox"/> Continuation-in-part	of prior application No.:

18. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number of Bar Code Label	(Insert Customer No or Attach bar code label here)	or <input checked="" type="checkbox"/> Correspondence address below
--	--	---

NAME	Wesley W. Whitmyer, Jr., Registration No. 33,558				
ADDRESS	St. Onge Steward Johnston & Reens LLC 986 Bedford Street				
CITY	Stamford	STATE	CT	ZIP CODE	06905-5619
COUNTRY	United States	TELEPHONE	203 324-6155	FAX	203 327-1096

Burden Hour Statement: This form is estimated to take 0.2 hour to complete. Times will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Office, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OF COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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FEE TRANSMITTAL

Patent fees are subject to annual revision on October 1.
These are the fees effective October 1, 1997.
Small Entity payments must be supported by a small entity statement,
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

Complete if Known

Application No.	- Pending
Filing Date	December 15, 1998
First Named Inventor	Matthew H. Parker, et al.
Group Art Unit	
Examiner Name	
Attorney Docket Number	02939-P0001A WWW

TOTAL AMOUNT OF PAYMENT

(\$ 534.00)

METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any over payment to:

Deposit Account Number	19-4516
Deposit Account Name	St. Onge Steward Johnston & Reens LLC

☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 ☐ Charge the issue Fee Set in 37 CFR 1.18 of the Mailing of the Notice of Allowance

2. ☒ Payment Enclosed:
☒ Check ☐ Money ☐ Other Order

FEE CALCULATION**1. BASIC FILING FEE**

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
101	760	201	380	Utility filing fee	380.00
106	310	206	155	Design filing fee	
107	480	207	240	Plant filing fee	
108	760	208	380	Reissue filing fee	
114	150	214	75	Provisional filing fee	
SUBTOTAL (1)					(\$ 380.00)

2. EXTRA CLAIMS FEES

Total Claims	Extra Claims	Fee from Below	Fee Paid
22	2	18	36.00
4	1	78	78.00
Multiple Dependent (No.)			

**or number previously paid, if greater; For Reissues, see below

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
103	18	203	9	Claims in excess of 20	
102	78	202	39	Independent claims in excess of 3	
104	260	204	130	Multiple dependent claims	
108	78	208	39	Reissue independent claims over original patent	
110	18	210	9	Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)					(\$ 114.00)

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing for or oath	
127	50	227	25	Surcharge - late provisional filing or cover Sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840	113	1,840	Requesting publication of SIR after Examiner Action	
115	110	215	55	Extension for reply within first month	
116	380	216	190	Extension for reply within second month	
117	870	217	435	Extension for reply within third month	
118	1,360	218	680	Extension for reply within fourth month	
128	1,850	228	925	Extension for reply within fifth month	
119	300	219	150	Notice of Appeal	
120	300	220	150	Filing a brief in support of an appeal	
121	260	221	130	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,210	241	605	Petition to revive - unintentional	
142	1,210	242	605	Utility issue fee (or reissue)	
143	430	243	215	Design issue fee	
144	580	244	290	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	240	126	240	Submission of Informational Disclosure Stmt	
581	40	581	40	Recording each patent assignment per Property (times number of properties)	40.00
146	790	246	395	Filing a submission after final rejection (37 CFR 1.129(a))	
149	279	249	395	For each additional invention to be Examined (37 CFR 1.129(b))	
Other fee (specify)					
Other fee (specify)					
SUBTOTAL (3)					(\$ 40.00)

* Reduced by Basic Filing Fee paid

SUBMITTED BY St. Onge Steward Johnston & Reens LLC

Complete (if applicable)

Typed or Printed Name Wesley W. Whitmyer, Jr.

Reg. Number 33,558

Signature

Date 12/17/98

Deposit Account User ID 19-4516

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